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Bib Data Sheet

SERIAL NUMBER 09/670,696	FILING DATE 09/28/2000 RULE -	CLASS 455	GROUP ART UNIT 2683	ATTORNEY DOCKET NO. 0301.396
APPLICANTS Joseph B. Sainton, Newberg, OR ; Charles M. Leedom JR., Falls Church, VA ; Eric J. Robinson, Ashburn, VA ; ** CONTINUING DATA ***** <i>ST</i> ** FOREIGN APPLICATIONS ***** <i>NONE ST</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/20/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>ST</i> Examiner's Signature Initials		STATE OR COUNTRY OR -	SHEETS DRAWING 16	TOTAL CLAIMS 23
ADDRESS 22204		TITLE Adaptive omni-modal radio apparatus and methods		
FILING FEE RECEIVED 744	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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CONFIRMATION NO. 8478

SERIAL NUMBER 09/670,696	FILING DATE 09/28/2000 RULE	CLASS 455	GROUP ART UNIT 2685	ATTORNEY DOCKET NO. 0301.396	
APPLICANTS Joseph B. Sainton, Newberg, OR; Charles M. Leedom JR., Falls Church, VA; Eric J. Robinson, Ashburn, VA;					
** CONTINUING DATA ***** <i>S.T.</i>					
** FOREIGN APPLICATIONS ***** <i>NONE S.T.</i>					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/20/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <i>S.T.</i> Verified and Acknowledged <i>S.T.</i> Examiner's Signature Initials		STATE OR COUNTRY OR	SHEETS DRAWING 16	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 3
ADDRESS Charles M Leedom Jr 6524 Truman Lane Falls Church ,VA 22043					
TITLE Adaptive omni-modal radio apparatus and methods					
FILING FEE RECEIVED 3222	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		